



PTO/SB/07 (08-00)

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MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET

(For use with Form PTO/SB/06)

Application Number  
**09/813,454**Filing Date  
**3/20/2001**

Applicant(s)

**Sigurd Wagner et al.**

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend						
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Total Indep	8											
Total Depend	43	←	←	←								
Total Claims	51											
Total Indep	4											
Total Depend	10	←	←	←								
Total Claims	14											

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12 IND.; 65 TOTAL